## ATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

1	0,	CLAIMS		S FILED - PART (Column 1)		.iann 2)	SMALL E	SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
	TOTAL CLAIMS						RATE	FEE	1 -	RATE	FEE	
	FOR		NUME	NUMBER FILED		BER EXTRA	BASICTEE	385.00	OR	BASIC FEE	770.00	
	TOTAL CHARGEABLE CLAIMS			minus 20= '			XS 9=		OR	X\$18=		
11	NDEPENDENT (	CLAIMS		minus 3 =	*		X43=		00	¥86=		
M	MULTIPLE DEPENDENT CLAIM PRESENT								OR			
-	* If the difference in column 1 is less than zero, enter "0" in col						+145=		OR	+290=		
						Joionn's	TOTAL.	<u> </u>	OR	TOTAL		
_	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2)					(Column 3)	SMALL	ENTITY	OB	OTHER SMALL		
AMENDMENT A		CLAIMS HEMAINING AFTER AMENDMENT		HEVIO PREVIO PAID I	BER USLY	PRESEUT EXTRA	RATE	ADDI TIONAL FEE		RATE	ADDI TIONAL FEE	
	Total	. 17	Minus	- G	0	2	X\$ 9=		ORI	XS18=		
ME	Independent		Minus	***	3	±: .	X43=		OR	86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									200		
		٠			•		+145=		OR	+290= TOTAL		
	.(Column 1) (Columu 2)					(6) (	ADDIT FEE	· ·	OH :	ADDIT FEE	L	
AMENDMENT B		CLAIMS	T	(Colun		(Column 3)	<u> </u>	ADDI-	1		.ADDI-	
		REMAINING AFTER AMENDMENT		DMUN OIVBRY FAID F	USt.*	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL	
	Totai		Mirius	**		~	X\$ 9.		QH	X\$18		
	Inaependent		Minus	***		=	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				CLAIM					+290=	·	
							. +140a 1014L		OH	TOTAL	· · · · · · · · · · · · · · · · · · ·	
							ADDIT TEE	······	OR	ADDIT FEE	L	
	(Column 1) (Column 2) (Column 3											
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA	. RATE .	AUÜİ- TIONAL+ FEE		RATE	ADDI- TIONAL FEE	
NDV	Total		Minus	**		±·	X\$ 9'=		OR	X\$18=		
AME	Independent		Minus	- dra-a		<b>5</b> .	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						X**3=		OR			
	I the entry in color	mn 1 is loss than th	e entry in a	olumo 2 iivito :	'O' in act		+145=		OR	+290=		
** (	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  TOTAL ADDIT. FEE									TOTAL ADDIT FEE		
			IND FOLINIA	HIS SDACE	loca the	1 7 0010- "7 "						